FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000050258 (8)

G.S.E. INTERNATIONAL, INC.

Principal Place of Business	Mailing Address		
8085 NORTH ATLANTIC AVENUE	8085 NORTH ATLANTIC AVENUE		
CAPE CANAVERAL FL 32820	CAPE CANAVERAL FL 32920		

FILED May 05 1998 8:00am Secretary of State



CAPE CANAVERAL FL 32920			CAPE CANAVERAL FL 32920						
		ONE ONE					DO NOT WRITE IN THIS SPACE		
						3.	Date Incorporated or Qualified		
]	06/12/1996		
2. Principal Pl	ace of Business	2a. Mailing A	.ddres s			4.	FEI Number		Applied For
21		26					59-3396991		Not Applicable
Suite, Apt.	#, etc.	Suite, Ap	t #, etc.				Certificate of Status Desired		75 Additional
22		27				3.	Certificate of Status Desired	F:	e Required
City & State)	City & Sta	ale			6.	Election Campaign Financing	\$5	.00 May Be
23		28					Trust Fund Contribution	Ac Ac	Ided to Fees
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible			
24	25	29	30			Personal Property Tax due June 30. Yes No			
	9. Name and Address of Cur	rent Registered Age	nt	-		10.	Name and Address of New Re	gistered Agent	
	REENFIELD, HARRY C			81	Name				ļ
80	O E. MERRITT ISLAND CSWY	#202		82	Street A	ddress (P	O. Box Number is Not Acceptal	ble)	
i Me	FIRITT ISLAND FL 32952					·····			
				83					
				84	City			85	Zip Code
					Oily			FL °°	ZIP COUR
office or re	o the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such d	hange was authori	zed by	the corpo	corporation pration's b	n submits this statement for the popular of directors. I hereby acce	purpose of chang pt the appointme	ing its registered nt as registered
SIGNATURE									
0.	Signature typical or printed minic of registered		(NOTE: Regist	ered Age	nt signature n			DATE	
12.		AND DIRECTORS	1:				ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	L		1 TITLE				□ Ch	ange 🔲 Addition
NAME	GIBSON, JASON		1.2	2 NAME					
STREET ADDRESS	8085 NORTH ATLANTIC A		1.3	3 STREET	ADDRESS				
CITY-ST-ZIP	CAPE CANAVERAL FL 329			4 CITY-S	T-ZiP				
TITLE	VSTD	L.	DELETE 2.1	1 TITLE				L Chi	ange 🔲 Addition
NAME (Gibson, Lisa		2.2	2 NAME					
STREET ADDRESS	8085 NORTH ATLANTIC A		2.3	3 STREET	ADDRESS				
CITY-ST-ZIP	CAPE CANAVERAL FL 329	920	2.	4 CITY - S	ST-ZIP				
TITLE	8		DELETE 3.1	1 TITLE			· 	Ch.	ange 🔲 Addition
NAME	GIBSON, CAROLE		3.2	2 NAME					
STREET ADDRESS	6990 RIDGWOOD AVE		3.3	3 STREET	ADDRESS				
CITY-ST-ZIP	COCOA BEACH FL		34	4. C(TY - S	31 - ZIP				
TITLE				1 TITLE			***************************************	Ch	ange L Addition
NAME			4.	2 NAME					
STREET ADDRESS			4.3	3 STREET	ADDRESS				
CITY-ST-ZIP			4.4	4 CITY - \$1	T-ŽIP				
TITLE				1 TITLE		·		☐ Ch	ange Addition
NAME			5.2	2 NAME					
STREET ADDRESS			l l	3 STREET	ADDRESS				
CITY-ST-ZIP				4 CNY-SI					
TITLE				1 111LE	1 · £4F			☐ Cha	ange Addition
NAME		L		2 NAME	}			ب	
1					In north				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		1 10 10 10 10 10 10 10 10 10 10 10 10 10	6.4	4 CITY - ST		l in Contin	440 07/9V/i) Fleride Otobuton I	7	

Indicated on this annual report or supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this corporation or the receiver or frustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

CAROLE CIBSON

4/24/05